

scribes a case of tabes in which all the upper teeth fell out in a short time, without pain of the usual kind, but with darting "lightning" pains through the face, and disturbance of sensibility in the region of the trifacial nerves. Post mortem, the floor of the fourth ventricle presented sclerosis, which involved the nuclei of the ninth, tenth, and eleventh nerves, the restiform bodies, and some of the neighboring parts; sclerotic change was distinctly seen in sections of the trigeminus where it leaves the pons. In another very similar case, the loss of teeth was confined to the upper jaw. The post-mortem appearances were almost exactly like those just enumerated, but more marked on the left side. One of the instances of loss of the toe-nails is given by Joffroy (*Arch. d phys.*, etc., 1882, No. 7). The great toes were the members affected, and there was no accompanying pain; the nails simply looking dark, with sub-ungual ecchymosis. The part was soon restored. Pitres relates in the *Progrès méd.*, No. 8, 1882, somewhat similar cases, in which, however, both great toe-nails were shed repeatedly; often deep-seated, dull pain, and a sensation of creeping in the affected parts for several weeks; and there was no ulceration or suppuration in these cases any more than in Joffroy's, and the new nails were in every instance perfectly formed, with the exception of slight superficial irregularities. An interesting instance of necrosis of the phalanges of the two great toes, in a case of locomotor ataxia, is described by Dr. Russell, of Birmingham, in the *Med. Times and Gaz.*, Aug. 19, p. 210.—*Brain*, Oct., 1882.

NYSTAGMUS PRODUCED BY THE CONSTANT CURRENT AS A SYMPTOM OF BULBAR AFFECTIONS.—Dr. Moosderf, in a communication read before the *Gesellschaft für Natur- und Heilkunde*, Dresden, on bulbar paralysis, states, as a new symptom of all bulbar affections, that by the transmission of a galvanic current transversely through the head, nystagmus is produced before the sensation of vertigo, which always accompanies such applications.—*Fahresbericht des Gesell. f. Natur- u. Heilk.*, Dresden, 1882.

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c.—MENTAL PATHOLOGY.

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FEMALE CRIMINALS.—Casini (*Archivio di psichiatria*, Fasc. iii) has been examining the skulls and faces of female criminals. He found that in the skulls of twenty-five murderesses there was ultra dolicocephaly three times; mesocephaly, fourteen times; and marked brachycephaly, eight times. He found also cranial asymmetry, in twenty-five out of sixty-one murderesses; in nine out of twenty thieves; in eight out of twenty-two child-killers. Euregmatism was found in seven out of sixty-one murderesses;

six out of twenty thieves ; two out of twenty-two child-killers. Abnormal ears were found in four out of sixty-one murderesses, and two out of twenty thieves. Imperfect development of the upper lip was found in eleven out of sixty-one murderesses ; three out of twenty thieves ; two out of twenty-two child-killers. These results would be of great value were the family and racial relations of the criminal determined. The presumption that a person committing a crime must necessarily be the victim of a congenital defect vitiates these researches, as it does the researches of Benedikt.

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GRÜBELSUCHT, FOLIE DU DOUTE.—Ball (*L'Encephale*, Nov. 2, 1882), has recently again called attention to this psychical manifestation. It consists of an uncontrollable and all-pervading sense of *doubt*,—doubt as to the commonest facts and acts of ordinary life and experience. What is seen must also be touched. What has been done must be done again, or some special measure taken to ascertain that it has been thoroughly accomplished. The consciousness which is plagued with this malady seldom rests and is a prey to worry. Locking a door, extinguishing a lighted candle or match, turning off the gas, or in some cases so simple a matter as placing a vase on a pedestal, or even a book on a table, are serious undertakings from which the mind shrinks ; or if the act be hastily and needlessly performed the sufferer endures a misery of misgiving for some time afterward, and, which makes the matter worse, the longer the doubt lasts the more oppressive does it become. All sorts of evils may ensue from his omission to lock that door or drawer, to turn off that gas-burner, or to place some ornament firmly enough on its pedestal. The victim of this malady may go to bed and try to sleep, but he will toss restlessly on his pillow, and at length *must* give in. From any distance or at any pains he returns to find that his fears have been wholly groundless. Ball claims that the French were the first to describe this condition, and that Dr. Berger had ignored the researches of French alienists in describing this condition under the term of Grübelsucht or metaphysical mania. The type as described by Berger covered greater ground than that of the French. The victim of metaphysical mania wonders, for example, why a table has four legs, why it should not have two, and loses himself without control in a host of analogous trivial metaphysical queries. The prognosis, Mortimer Granville to the contrary, notwithstanding, is, as a rule, not very good, as the condition usually occurs in hereditarily defective persons. A variety has been described by Dr. Hammond under the title of mysophobia. As Berger (*Neurologisches Centralblatt*), November 15, 1882, very pertinently says, Ball could scarcely have read his work on Grübelsucht, or he would have found full credit given Falret and other French alienists. From an impartial stand-point, Ball seems to have exhibited a lack of familiarity with psychiatric literature equal to that with which he charges Dr. Berger.